

**Utah's Division of Child and Family Services**

# **Southwest Region Report**

## **Qualitative Case Review Findings**

**Review Conducted**

**September 17-20, 2012**

*A Report by*

*The Office of Services Review, Department of Human Services*

# **I. Introduction**

The Southwest Region Qualitative Case Review (QCR) for FY2013 was held the week of September 17-20, 2012. Reviewers were selected from the Office of Services Review, the Division of Child and Family Services, community partners, and other interested parties. Two individuals associated with the Child and Family Services Review at the federal level also participated in the review. Reviewers included representatives from the following Utah organizations:

- Children's Justice Center
- Safety Solutions
- Washington School District
- Quality Improvement Committees

There were 20 cases randomly selected for the Southwest Region review. The case sample included 15 foster care cases and five in-home cases. Cases were selected from the Beaver, Cedar City, Kanab, Manti, Panguitch, Richfield, and St. George offices. A certified lead reviewer and shadow reviewer were assigned to each case. Information was obtained through in-depth interviews with the child (if old enough to participate), his or her parents or other guardians, foster parents (if child was placed in foster care), caseworker, teacher, therapist, other service providers, and others having a significant role in the child's life. Additionally, the child's file, including prior CPS investigations and other available records, was reviewed.

Staff from the Office of Services Review met with region staff on December 13, 2012 in an exit conference to review the results of the region's QCR. Scores and data analysis were presented to the region.

## **II. Stakeholder Observations**

The results of the QCR should be considered within a broad context of local and regional interaction with community partners. Each year Office of Services Review interviews key community stakeholders such as foster parents, providers, representatives from the legal community, other community agencies, and DCFS staff. On September 13, 19, and 20, 2012 OSR interviewed individuals and groups of DCFS staff and community partners. DCFS staff who were interviewed included the Region Director, region administrators, supervisors, and caseworkers. Community partners interviewed included Children's Justice Center, Richfield Police Department, QIC members, Central Utah Counseling, Richfield High School Principal, New Horizons Crisis Center, Chrysalis, Utah Foster Care Foundation, Youth in Custody, and a Juvenile Court Judge.

Strengths and opportunities for improvement were identified by the various groups of stakeholders as described below. Because the region covers a vast geographic area made up of divergent communities, the comments are divided into three general areas: Manti/Richfield, Cedar City, and St. George.

### **Manti/Richfield-DCFS Caseworkers**

#### **Strengths**

The spirit of team work within the office is good. Caseworkers, supervisors, and assistants work together to get things done. They do a lot of good problem solving together.

In both offices there is good communication between workers and supervisors, and workers feel supported by their supervisors.

There are more in-home cases, and the children are safe at home and don't need to come into foster care.

The Children's Justice Center is operating well. They're working on getting all law enforcement to use the Center. They have an advantage in working with law enforcement because the communities are small and they personally know the officers.

Implementation of new technology such as new cell phones and Skype has made the caseworkers' jobs easier. Caseworkers see administrators finding ways to make the caseworkers' jobs better.

The QCR review went well and caseworkers are glad they again have the opportunity to meet with the reviewers at the conclusion of the case. Reviewers had good suggestions for the caseworkers.

#### **Improvement Opportunities**

Lack of resources is an ongoing barrier. Youth advocates, peer parents, and good foster homes are needed. They also need experienced therapists who specialize in areas such as sex abuse.

The time caseworkers have to spend to travel the distances they must cover makes their job difficult. It's also a barrier to visitation between parents and children. There are no funds to help parents with the cost of visitation, such as gas, yet parents get in trouble if they don't make the visits.

DCFS believes law enforcement isn't comfortable calling Centralized Intake directly and they don't believe their referrals will be accepted, so DCFS encourages them to call the local DCFS office who will then forward the information to Centralized Intake. Caseworkers also wonder why referrals that they believe should be accepted are rejected and vice versa.

Parts of Practice Model training are helpful, but others aren't. The best resource for new caseworkers is their fellow caseworkers.

Caseworkers don't think TASC (the drug testing contractor) is tracking when parents are calling in. Sometimes clients don't appear in the TASC system although the caseworker knows they were tested. Testing hours are also very limited, making it difficult for working parents to test without having to miss work or youth having to be pulled out of school to test.

There are more in-home cases, but more caseworkers are needed to support the families. When workers can only make one visit per month to the home, they can't accomplish much. Also, they need more wraparound services to be able to help families whose children remain in the home. The vision of keeping children in their homes can't be accomplished if there aren't any wraparound services to support the family. Foster children have all the medical care, school supplies, clothing, etc. that they need, but children who are left in their homes often don't have these basics. Also, foster children have teams of professionals around them consisting of therapists, mentors, guardians ad litem, trackers, nurses, etc. while in-home children have only a caseworker.

## **Manti-Richfield-Community Partners**

### **Strengths**

Richfield Police Department always uses the Children's Justice Center (CJC) for interviewing children. It takes longer to get the family, law enforcement, victim, and DCFS together, but it's worth it because the results are better. The children are more comfortable being interviewed at CJC, and law enforcement is able to focus on the evidence rather than the interview because DCFS does the interview. DCFS has demonstrated more patience in interviewing children than law enforcement has.

CPS workers are doing a good job, and area schools understand the reporting requirements and know how to make a report. The current CPS workers are the best workers the community has ever had.

The supervisor of Centralized Intake is working hard to answer the community's concerns.

Community partners were glad to see QCR continue beyond the termination of the lawsuit. They would like to see QCR reviews done on CPS cases.

There are very helpful coordinating meetings between the school, DCFS, JJS, and 4-H.

The high school principal knows which students are in foster care, and he knows the DCFS caseworkers. There is a good working relationship between the school and DCFS.

### **Improvement Opportunities**

At every monthly meeting of community partners, there's talk about Centralized Intake because there's so much dissatisfaction with how referrals are being handled. Law enforcement doesn't like centralized intake because it takes too long to get anyone to respond. Centralized Intake turns cases down, and then law enforcement ends up doing them anyway. Law enforcement doesn't understand why some cases are turned down. The communities would like the employees at Centralized Intake to be better trained. Also, Centralized Intake sends notice to law enforcement that they've closed a case, but the notice doesn't indicate who the child was or which case it was, so law enforcement just discards the notice.

The receiving center is now open only 10:00 a.m. to 4:00 p.m. Law enforcement really needs the receiving center to be open 24 hours a day. Otherwise they have no place to take teenage offenders.

Changes to the statute regarding Domestic Violence Related Child Abuse have left people unsettled. DCFS staff aren't sure now what their job is or what they should do to address domestic violence. There's been a lot of resistance in both DCFS and the community to the changes that have been made in how DCFS responds to domestic violence.

Medicaid plays a huge role at Central Utah Counseling (CUC). A child who has Medicaid has a golden ticket to receive services. Children without Medicaid have to have a very significant issue to be seen at CUC; otherwise they're referred to other providers.

Some important services aren't available locally. There are no services in the area for autistic children. The nearest child psychologist is in Provo, and a psychiatrist who can prescribe medication has to come down from Provo.

### **Cedar City-DCFS Caseworkers**

#### **Strengths**

Caseworkers believe the most valuable tool they have to determine placement is the Placement Screening Committee. They believe the combined assessment of this group leads to better results than the CANS assessment.

#### **Improvement Opportunities**

Because of changes to the Domestic Violence statute, by the time a Domestic Violence case is referred to the region, the risk is very elevated or someone has already been hurt.

Workers feel the CANS assessment is very subjective. They don't like that it limits the assessment to only the last 30 days. They feel it's just one more thing they have to do, and it isn't helpful.

Some Practice Model training is useful, but a lot of it is a repeat of what workers learned in school. The amount of class time required takes away from gaining experience in the field. If training was more hands on, candidates could find out sooner whether casework is a good career fit for them or not. Caseworkers would like to be able to incorporate their real cases in training. They would also like some time in training during which CPS, foster care, and in-home workers were trained separately on the unique aspects of their jobs.

Caseworkers are finding TASC challenging for many reasons such as their limited hours of operation, not being able to test people immediately when they appear to be high, having to wait too long for results, lost samples, insufficient samples, tests having to be repeated, the expense, and TASC only accepting money orders.

Caseworkers have to use their personal vehicles because state vehicles are in such demand they are unavailable when caseworkers need them.

Caseworkers feel they're not included in conversations about changes such as changes to SAFE, the building, cubicles, office or position reassignments, etc.

Supervisors won't let caseworkers open voluntary cases because the workload is already too high, so they have to wait until services are court ordered to help the family.

### **Cedar City-Community Partners**

#### **Strengths**

A new mentor program started at the beginning of the school year. The mentor is meeting all of the foster youth and caseworkers. She checks grades and supports the caseworkers by helping the youth get to school and stay in school. She coordinates a tutoring program and attends team meetings with DCFS.

Most foster parents engage well with the school.

### **St. George-DCFS Caseworkers**

#### **Strengths**

Centralized Intake damaged some relationships with law enforcement that DCFS had worked hard to build, but relationships are improving as time goes on.

The assistant attorneys general interface well with DCFS and the guardians ad litem. Guardians ad litem also interface well with DCFS.

Structured Decision Making has changed the way cases are staffed so that caseworkers no longer make decisions on their own about whether a child should be removed from home.

Parent locator software has been helpful to locate parents and kin.

The shift to in-home cases presents an excellent opportunity to retain caseworkers who have gained clinical skills, because these caseworkers could do clinical work with the families in their homes.

### **Improvement Opportunities**

Caseworkers miss the Domestic Violence program. They used to have lots of domestic violence resources that they no longer have. Because of the changes, the individuals with expertise in domestic violence aren't the ones who make the decisions on domestic violence cases anymore.

Structured Decision Making has increased the workload on caseworkers because they staff cases more often and have to visit families more often. The goal is to have more children remain in their homes, but there aren't services to support the families. There's a new in-home model, but there aren't services to back it up. Caseworkers are feeling more job stress due to worrying about children who are left in their homes.

The region is simultaneously trying to implement Centralized Intake, Structured Decision Making, and Level 3 foster homes, but there hasn't been any increase in manpower, tools, or resources to support the changes.

There is a lack of therapeutic services, so children are being moved from individual therapy to group therapy, which isn't intense enough. The local mental health provider is overwhelmed, which is straining their relationship with DCFS.

There are problems with the drug testing provider that include limited hours of operation, caseworkers not being able to check results, and getting approval for drug tests.

DCFS is keeping some children in custody only because they can't get DSPD services. When DCFS services are terminated, these children will need supported living arrangements.

### **St. George-Community Partners**

#### **Strengths**

Community partners have had a positive experience over the past several years with DCFS. They find team meetings helpful.

DCFS caseworkers go above and beyond what they're required to do. They're very responsive to e-mails or questions from the providers.

There have been some great successes with delinquency cases.

Assessments are getting done now that DCFS does them in-house.

There is enough capacity in Family Drug Court to meet the need. They don't have to turn anyone away.

### **Improvement Opportunities**

It would be helpful for DCFS and DSPD to cross-train on how each other's systems work.

Everything is going well except the drug testing contract. Parents are losing their jobs because they have to leave work to go drug test. The requirement that the co-pay be a money order is also a barrier. It is so difficult for parents to test that it doesn't meet the reasonable efforts standard.

The judge is concerned that domestic violence cases that should be accepted are being unaccepted for investigation by Centralized Intake.

### **Region Director, Administrators, and Supervisors**

#### **Strengths**

Every worker has been asked to do a three-day domestic violence training, and most have completed it.

The region got approval to fill all their empty positions, so the caseworker situation went back to normal. Any empty positions now are due to reorganization. They just had the largest training group they've ever had.

The Regional Director and Associate Regional Director are exceptional leaders.

DCFS worked hard to get a couple of Children's Justice Centers in the northern end of the region, and the Centers are doing well.

The region has put a lot of emphasis on finding and supporting kinship placements. They've hired a kinship specialist, but they still don't have all the staffing they'd like to have. The specialist is very pro-active about locating kin. The region is reaping the benefits from the families that have been located.

The region agrees with the bulk of cases that Centralized Intake is screening out. The number of overrides is going down. Centralized Intake has done a good job of being open to feedback and being responsive.

The region now always has a hiree ready to fill a position if someone quits. This has worked great for the region.



### **Improvement Opportunities**

The number of domestic violence referrals is down by 50% in Iron County. Referrals aren't resulting in cases being opened until something drastic happens. Law enforcement has stopped making referrals because Centralized Intake doesn't accept them.

Centralized Intake is not accepting cases that the region thinks are clearly within the boundaries of abuse, neglect, or domestic violence.

There are caseworkers with master's degrees who are stuck at the caseworker level because they can't be promoted. It's extremely difficult to get positions reclassified even if they have the budget to do so. Caseworkers end up leaving the agency and taking their training and experience to other agencies. Staff are also frustrated by the change in requirements for SSW licensure. The required classes are expensive and not available locally.

There is only a small pool of providers, and everyone has a waiting list. The main providers are losing interest in providing services to DCFS children, so DCFS is looking for smaller providers.

DCFS is looking for ways to replace services the Legislature cut such as the Crisis Centers in Cedar City and St. George.

### **III. Child and Family Status, System Performance, Analysis, and Trends**




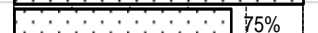
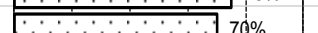
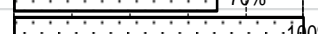
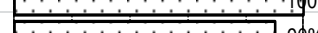
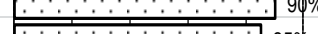



The QCR findings are presented in graphic form to help quantify the observations of the qualitative review. Graphs show a comparison of scores for past years' reviews with the current review. The graphs of the two broad domains of Child and Family Status and System Performance show the percent of cases in which the key indicators were judged to be "acceptable." A six-point rating scale is used to determine whether or not an indicator is judged to be acceptable. Reviewers scored each of the cases reviewed using this rating scale. The range of ratings is as follows:

- 1: Completely Unacceptable
- 2: Substantially Unacceptable
- 3: Partially Unacceptable
- 4: Minimally Acceptable
- 5: Substantially Acceptable
- 6: Optimal Status/Performance

Child and Family Status and System Performance are evaluated using 15 key indicators. Graphs presenting the overall scores for each domain are presented below. They are followed by graphs showing the distribution of scores for each indicator within each of the two domains.

## Child and Family Status Indicators

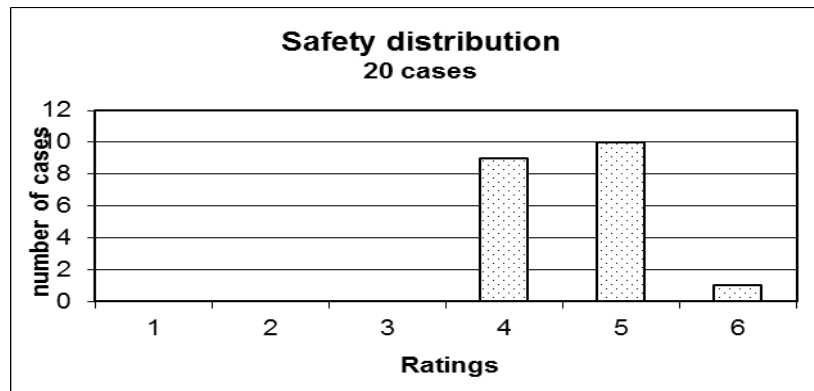
### Overall Status

Southwest Child Status										
	# of cases (+)	# of cases (-)	Standard: 70% on all indicators except Safety which is 85% Standard: Criteria 85% on overall score	FY08	FY09	FY10	FY11	FY12	FY13 Current Scores	Trends
Safety	20	0	 100%	92%	96%	96%	88%	95%	100%	Improved and above standard
Child Safe from Others	20	0	 100%				92%	95%	100%	Improved and above standard
Child Risk to Self or Others	20	0	 100%				96%	100%	100%	Status Quo and above standard
Stability	15	5	 75%	71%	71%	75%	71%	75%	75%	Status Quo and above standard
Prospect for Permanence	14	6	 70%	71%	67%	75%	63%	65%	70%	Improved and above standard
Health/Physical Well-being	20	0	 100%	100%	100%	100%	100%	100%	100%	Status Quo and above standard
Emot./Behavioral Well-being	18	2	 90%	83%	96%	96%	92%	85%	90%	Improved and above standard
Learning	17	3	 85%	96%	92%	92%	92%	80%	85%	Improved and above standard
Family Connections	8	3	 73%					67%	73%	Improved and above standard
Satisfaction	16	3	 84%	83%	92%	83%	79%	100%	84%	Decreased but above standard
<b>Overall Score</b>	<b>19</b>	<b>1</b>	 95%	<b>92%</b>	<b>96%</b>	<b>96%</b>	<b>88%</b>	<b>85%</b>	<b>95%</b>	Improved and above standard
0% 20% 40% 60% 80% 100%										

## Safety

**Summative Questions:** Is the child safe from threats of harm in his/her daily living, learning, working and recreational environments? Are others in the child's daily environments safe from the child? Does the child avoid self-endangerment and refrain from using behaviors that may put self and others at risk of harm?

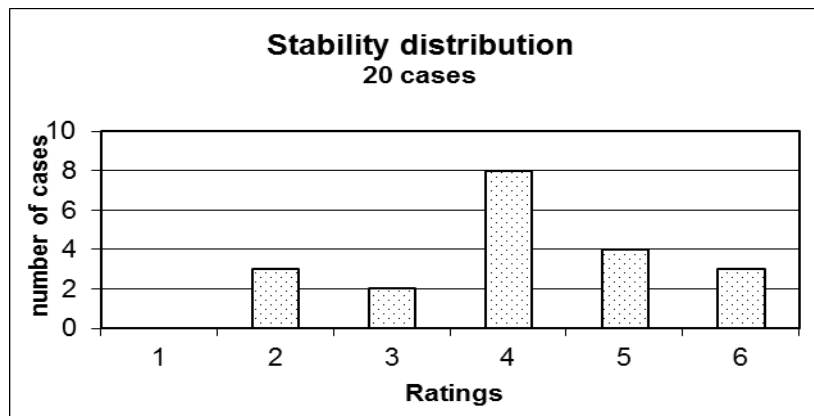
**Findings:** 100% of cases reviewed were in the acceptable range (4-6). This is an increase from last year's score of 95%. Out of the 20 cases reviewed, none had an unacceptable score on Safety.



## Stability

**Summative Questions:** Has the child's placement setting been consistent and stable? Are the child's daily living and learning arrangements stable and free from risk of disruption? If not, are appropriate services being provided to achieve stability and reduce the probability of disruption?

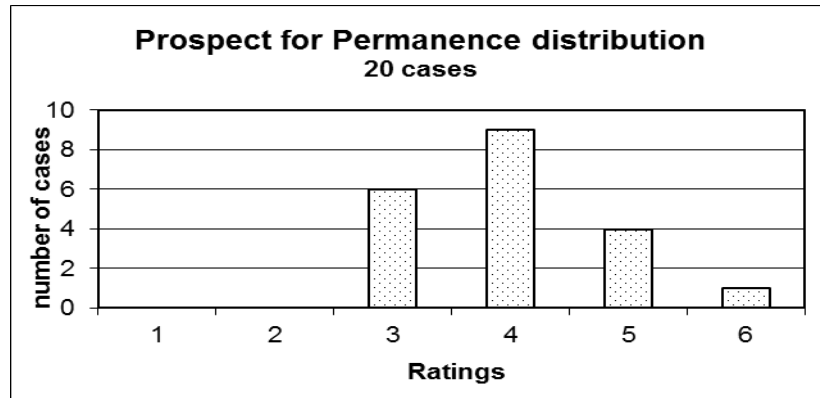
**Findings:** 75% of cases reviewed were in the acceptable range (4-6). This is identical to last year's score of 75% and above standard.



## Prospects for Permanence

**Summative Questions:** Is the child living with caregivers that the child, caregivers, and other stakeholders believe will endure until the child becomes independent? If not, is a permanency plan presently being implemented on a timely basis that will ensure that the child will live in enduring relationships that provide a sense of family, stability, and belonging?

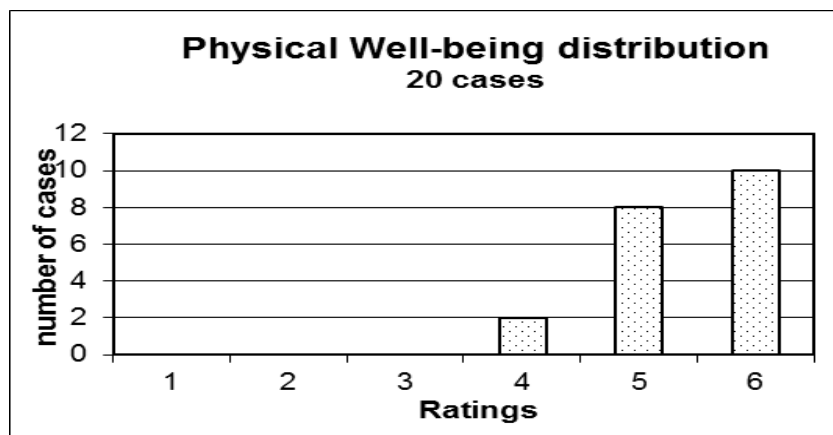
**Findings:** 70% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 65% and meets the 70% standard.



## Health/Physical Well-Being

**Summative Questions:** Is the child in good health? Are the child's basic physical needs being met? Does the child have health care services, as needed?

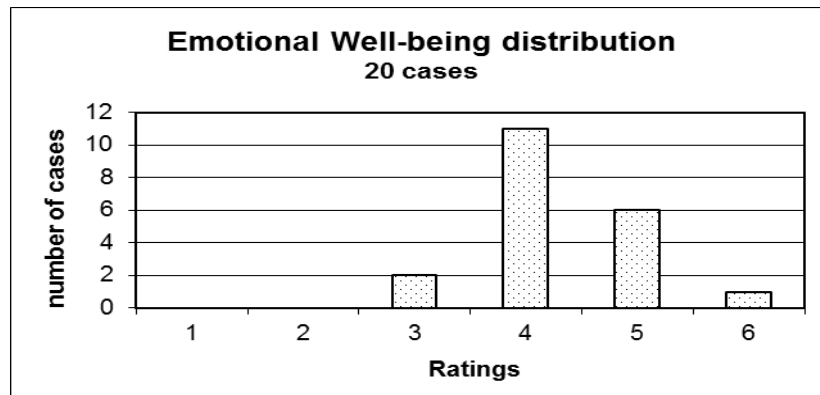
**Findings:** 100% of cases reviewed were in the acceptable range (4-6). For the past several years this indicator has scored 100%.



## Emotional/Behavioral Well-Being

**Summative Questions:** Is the child doing well emotionally and behaviorally? If not, is the child making reasonable progress toward stable and adequate functioning, emotionally and behaviorally, at home and school?

**Findings:** 90% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 85% and above standard.

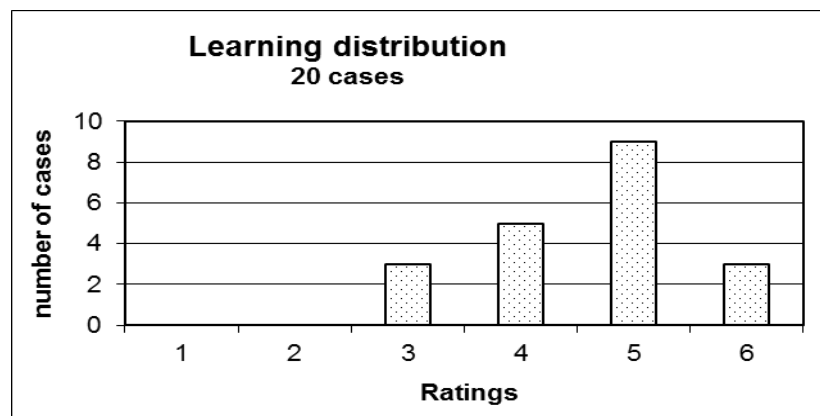


## Learning Progress

**Summative Question:** (For children age five and older.) Is the child learning, progressing and gaining essential functional capabilities at a rate commensurate with his/her age and ability?

Note: There is a supplementary scale used with children under the age of five that puts greater emphasis on developmental progress. Scores from the two scales are combined for this report.

**Findings:** 85% of cases reviewed were within the acceptable range (4-6). This is an increase over last year's score of 80% and well above standard.



## Family Connections

**Summative Question:** While the child and family are living apart, are family relationships and connections being maintained through appropriate visits and other connecting strategies, unless compelling reasons exist for keeping them apart?

**Findings:** 73% of cases scored acceptable on Overall Family Connections. This is an increase from last year's score of 67%. This indicator measures whether or not the relationships between the child and the mother, father, siblings, and other important family members are being maintained. The score for the Fathers was the highest at 88%. This is commendable as other regions are struggling to maintain connections between children and their fathers, and Southwest region scored only 33% last year. The score for mothers was somewhat lower at 78%, but this is an increase from last year's score of 71%. The score for Siblings was 50%; however, there were only four cases that were applicable. There were six cases on which additional relationships with others were being maintained. The others were four grandparents, a biological father whose parental rights had been terminated, and a stepfather.

Southwest Family Connections				
	# of cases (+)	# of cases (-)	FY12	FY13 Current Scores
Overall Connections	8	3	67%	73%
Siblings	2	2	60%	50%
Mother	7	2	71%	78%
Father	7	1	33%	88%
Other	5	1	78%	83%

## Satisfaction

**Summative Question:** Are the child, parent/guardian, and substitute caregiver satisfied with the supports and services they are receiving?

**Findings:** 84% of cases reviewed were within the acceptable range (4-6) on the overall Satisfaction score. This is a decrease from last year's score of 100%. Reviewers rated the satisfaction of children, mothers, fathers, and caregivers. Scores for the individual parties ranged

from 91% for caregivers to 50% for fathers. There was one case that was not scored on Satisfaction because all of the roles that are typically scored were not applicable.



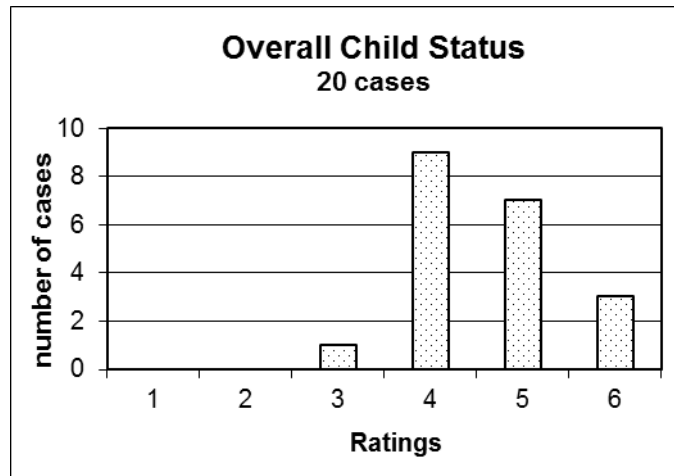
Southwest Satisfaction								
	# of	# of	FY08	FY09	FY10	FY11	FY12	FY13
	cases	cases						Current
	(+)	(-)						Scores
<b>Satisfaction</b>	16	3	83%	92%	83%	79%	100%	<b>84%</b>
Child	9	1	90%	100%	75%	100%	100%	<b>90%</b>
Mother	11	3	75%	82%	71%	57%	79%	<b>79%</b>
Father	4	4	75%	82%	71%	57%	88%	<b>50%</b>
Caregiver	10	1	87%	94%	88%	92%	100%	<b>91%</b>

## Overall Child and Family Status

**Summative Questions:** Based on the Qualitative Case Review scores determined for the Child and Family Status indicators, how well are this child and family presently doing? A special scoring procedure is used to determine Overall Child and Family Status using the 6-point rating scale. In addition to scoring a 4 with this procedure, four of the first seven status indicators (minus Satisfaction) must score acceptable in order for the Overall Score to be acceptable. A unique condition affects the rating of Overall Child and Family status in every case: The Safety indicator always acts as a “trump” so that the Overall Child and Family status rating cannot be acceptable unless the Safety indicator is also acceptable.





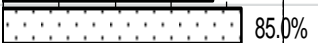

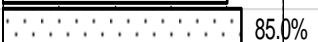

**Findings:** 95% of cases reviewed were within the acceptable range (4-6). This is an increase from last year’s score of 85% and well above the 85% standard.





## System Performance Indicators

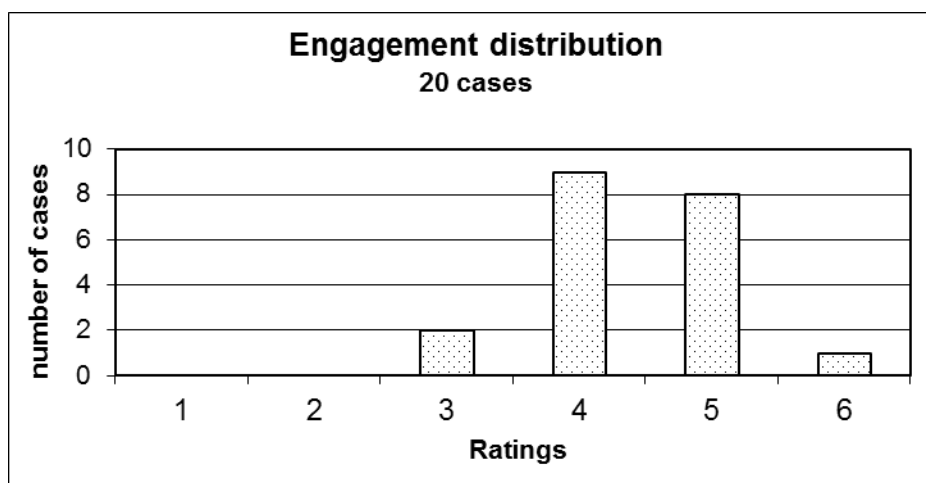
### Overall System

Southwest System Performance											
	# of cases (+)	# of cases (-)		FY08	FY09	FY10	FY11	FY12	FY13		
			Standard: 70% on all indicators						<b>Current</b>		
			Standard: 85% on overall score						<b>Scores</b>	<b>Trends</b>	
Engagement	18	2		92%	88%	88%	75%	90%	<b>90%</b>	Status Quo and above standard	
Teaming	15	5		79%	92%	63%	75%	65%	<b>75%</b>	Improved and above standard	
Assessment	17	3		75%	75%	75%	79%	75%	<b>85%</b>	Improved and above standard	
Long-term View	15	5		75%	88%	75%	63%	65%	<b>75%</b>	Improved and above standard	
Child & Family Plan	17	3		88%	83%	83%	75%	80%	<b>85%</b>	Improved and above standard	
Intervention Adequacy	16	4		79%	100%	83%	88%	80%	<b>80%</b>	Status Quo and above standard	
Tracking & Adapting	17	3		88%	88%	71%	79%	85%	<b>85%</b>	Status Quo and above standard	
<b>Overall Score</b>	<b>17</b>	<b>3</b>		<b>88%</b>	<b>96%</b>	<b>92%</b>	<b>83%</b>	<b>80%</b>	<b>85%</b>	Improved and above standard	
			0% 20% 40% 60% 80% 100%								

## Engagement

**Summative Questions:** Has the agency made concerted efforts to actively involve parents and children in the service process and in making decisions about the child and family? To what extent has the agency used rapport building strategies, including special accommodations, to engage the family?

**Findings:** 90% of cases reviewed were within the acceptable range (4-6). This is identical to last year's score and well above standard. Separate scores were given for child, mother, father and guardian. An overall score was then selected by the reviewer. Scores for the various groups ranged from a high of 100% for the child to 73% for guardians. The scores for every category were above standard.

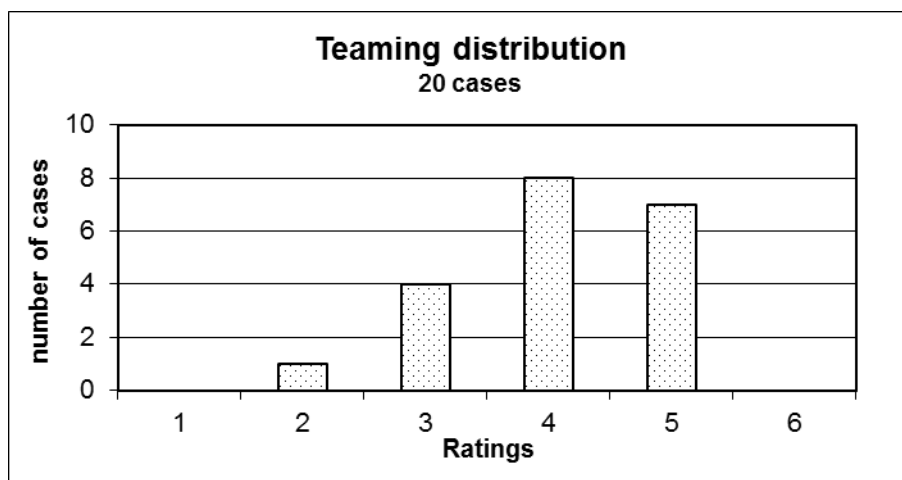


Southwest Engagement				
	# of	# of	FY12	FY13
	cases	cases		Current
	(+)	(-)		Scores
Engagement	18	2	90%	90%
Child	18	0	86%	100%
Mother	13	2	80%	87%
Father	10	2	55%	83%
Guardian	8	3	100%	73%

## Teaming

**Summative Questions:** Do the child, family, and service providers function as a team? Do the actions of the team reflect a pattern of effective teamwork and collaboration that benefits the child and family? Is there effective coordination in the provision of services across all providers?

**Findings:** 75% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 65% and above standard.



## Assessment

**Summative Questions:** Are the current, obvious and substantial strengths and needs of the child and family identified through existing assessments, both formal and informal, so that all interveners collectively have a “big picture” understanding of the child and family? Do the assessments help the team draw conclusions on how to provide effective services to meet the child’s needs for enduring permanency, safety, and well-being? Are the critical underlying issues identified that must be resolved for the child to live safely with his/her family independent of agency supervision or to obtain an independent and enduring home?

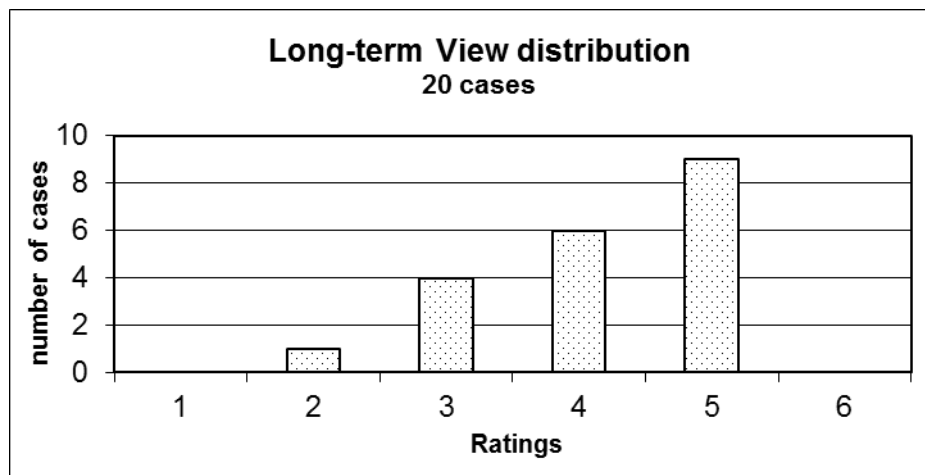
**Findings:** 85% of cases reviewed were in the acceptable range (4-6). This is an increase from last year's score of 75% and well above the 70% standard. Individual scores were given for this indicator. The scores ranged from a high of 90% on the Child's score to 73% and 75% respectively for mothers and fathers. As with Engagement, the scores for every category were above standard.

Southwest Assessment				
	# of	# of	FY12	FY13
	cases	cases	Current	Current
	(+)	(-)	Scores	Scores
Overall Assessments	17	3	75%	<b>85%</b>
Child	18	2	75%	<b>90%</b>
Mother	11	4	60%	<b>73%</b>
Father	9	3	50%	<b>75%</b>
Caregiver	10	3	90%	<b>77%</b>

## Long-Term View

**Summative Questions:** Is there a path that will lead the family and/or child toward achieving enduring safety and permanency without DCFS interventions? Is it realistic and achievable? Does the team, particularly the child/family, understand the path and destination? Does the path provide steps and address the next major transition(s) toward achieving enduring safety and permanence independent of DCFS interventions?

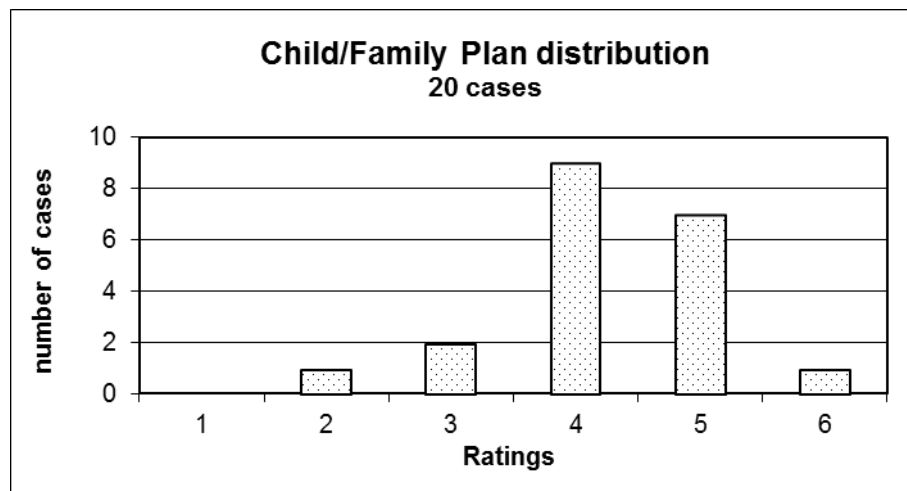
**Findings:** 75% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 65% and above standard.



## Plan

**Summative Questions:** Is the Child and Family Plan individualized and relevant to needs and goals? Are supports, services and interventions assembled into a holistic and coherent service process that provides a mix of elements uniquely matched to the child/family's situation and preferences? Does the combination of supports and services fit the child and family's situation so as to maximize potential results and minimize conflicting strategies and inconveniences?

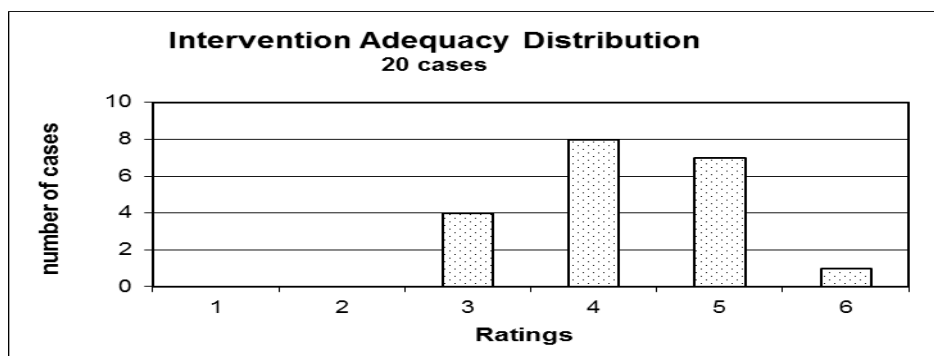
**Findings:** 85% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score of 80% and above standard.



## Intervention Adequacy

**Summative Questions:** To what degree are the planned interventions, services, and supports being provided to the child and family of sufficient power (precision, intensity, duration, fidelity, and consistency) and beneficial effect to produce results that would enable the child and family to live safely and independent from DCFS?

**Findings:** 80% of cases reviewed were within the acceptable range (4-6). This is identical to last year's score and above standard. This indicator was scored separately for Child, Mother, Father, and Caregiver. Scores ranged from a high of 100% for fathers to 82% for mothers. As with Engagement and Assessment, every category was above standard.

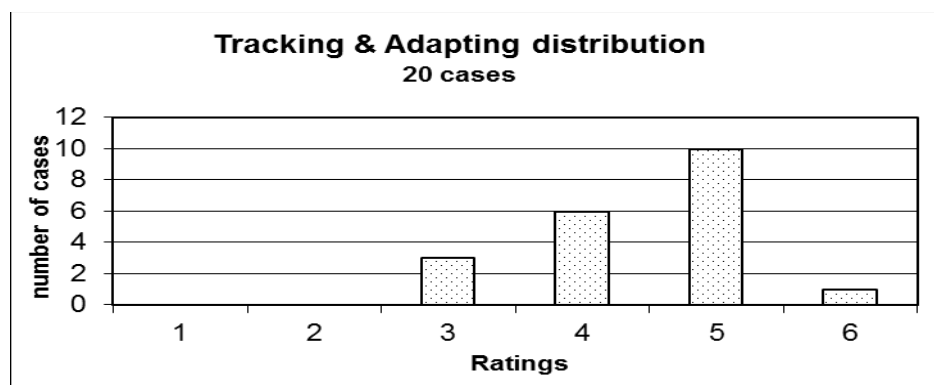


Southwest Intervention Adequacy				
	# of cases (+)	# of cases (-)	FY12	FY13 Current Scores
<b>Overall Intervention Adequacy</b>	16	4	80%	<b>80%</b>
Child	18	2	80%	<b>90%</b>
Father	4	0	40%	<b>100%</b>
Mother	9	2	54%	<b>82%</b>
Caregiver	11	1	90%	<b>92%</b>

## Tracking and Adaptation

**Summative Questions:** Are the child and family status, service process, and progress routinely monitored and evaluated by the team? Are services modified to respond to the changing needs of the child and family and to apply knowledge gained about service efforts and results to create a self-correcting service process?

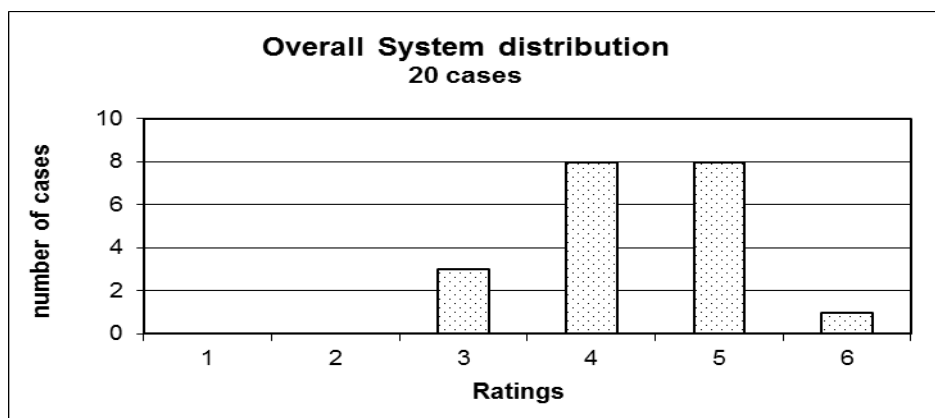
**Findings:** 85% of cases reviewed were in the acceptable range (4-6). This is identical to last year's score and well above standard.



## Overall System Performance

**Summative Questions:** Based on the Qualitative Case Review scores determined for System Performance indicators, how well is the service system functioning for this child now? A special scoring procedure is used to determine Overall System Performance using the 6-point rating scale. Four of the seven system performance indicators must score acceptable in order for the overall score to be acceptable.

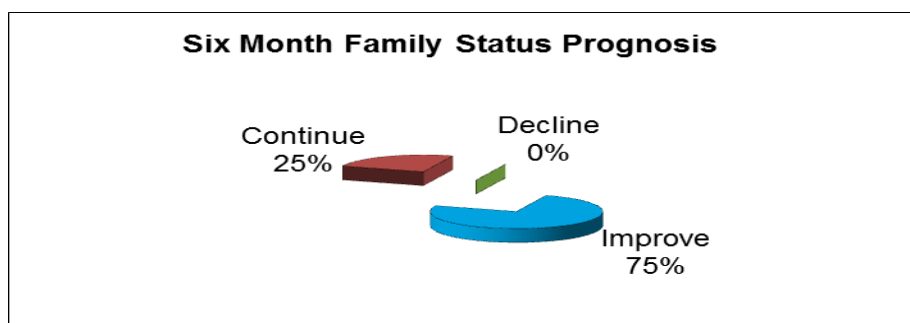
**Findings:** 85% of cases reviewed were within the acceptable range (4-6). This is an increase from last year's score and meets the standard.



## Status Forecast

One additional measure of case status is the reviewers' prognosis of the child and family's likely status in the next six months, given the current level of system performance. Reviewers respond to this question: "Based on current DCFS involvement for this child, family, and caregiver, is the child's overall status likely to improve, stay about the same, or decline over the next six months?"

Of the 20 cases reviewed, 75% (15 cases) anticipated an improvement in family status over the next six months. In 25% (5) of the cases, family status was likely to stay about the same. There were no cases where the family's status was expected to decline over the next six months.





## Outcome Matrix

The display below presents a matrix analysis of the service testing results during the current QCR. Each of the cells in the matrix shows the percent of children and families experiencing one of four possible outcomes:

- Outcome 1: child and family status acceptable, system performance acceptable
- Outcome 2: child and family status unacceptable, system performance acceptable
- Outcome 3: child and family status acceptable, system performance unacceptable
- Outcome 4: child and family status unacceptable, system performance unacceptable

The desired result is to have as many children and families in Outcome 1 as possible and as few in Outcome 4 as possible. It is fortunate that some children and families do well in spite of unacceptable system performance (Outcome 3). Experience suggests that these are most often either unusually resilient or resourceful children and families, or children and families who have some “champion” or advocate who protects them from the shortcomings of the system. Unfortunately, there may also be some children and families who, in spite of good system performance, do not do well. (These children and families would fall in Outcome 2).

The outcome matrix for children and families reviewed indicates that 80% of the cases had acceptable ratings on both Child Status and System Performance. There was one case that rated unacceptable on Child Status and acceptable on System Performance, and three cases that rated acceptable on Child Status and unacceptable on System Performance. There were no cases that rated unacceptable in both domains.

	Favorable Status of Child Outcome 1	Unfavorable Status of Child Outcome 2	
<b>Acceptable System Performance</b>	Good status for the child, agency services presently acceptable.  n= 16 80%	Poor status for the child, agency services minimally acceptable but limited in reach or efficacy.  n= 1 5%	<b>85%</b>
<b>Unacceptable System Performance</b>	<b>Outcome 3</b> Good status for the child, agency Mixed or presently unacceptable.  n= 3 15%	<b>Outcome 4</b> Poor status for the child, agency presently unacceptable.  n= 0 0%	<b>15%</b>
	<b>95%</b>	<b>5%</b>	

## V. Analysis of the Data

### RESULTS BY CASE TYPE

The following tables compare how the different Case Types performed on some key child status and core system performance indicators. There were no family preservation (PFP/PFR) or voluntary cases (PSC) in the sample. Court ordered In-home services cases (PSS) scored 100% on Overall Child Status and 83% on Overall System Performance. Foster Care cases scored similarly on both Overall Child Status (93%) and Overall System Performance (86%). All key indicators except Permanency scored above standard on foster cases, and all but Teaming scored above standard on In-home cases.

Case Type		# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Foster Care	SCF	14	100%	57%	93%	86%	79%	86%	71%	79%	79%	79%	86%
In-Home	PSS	6	100%	100%	100%	100%	67%	83%	83%	100%	83%	100%	83%
In-Home	PSC	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
In-Home	PFP	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%

Collection of demographic information regarding cases included in the case sample includes the question, “Did the child come into services due to delinquency instead of abuse and neglect?” Only three of the 20 cases (15%) in the sample are reported to have entered services due to delinquency rather than abuse or neglect. The following table shows that delinquency cases did not score quite as well as non-delinquency cases on Stability, Prospects for Permanency, or Overall System Performance; however, they scored better on Overall Child Status.

Case Type	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
Delinquency	3	67%	67%	100%	67%
Non-Delinquency	17	76%	71%	94%	88%

## RESULTS BY PERMANENCY GOAL

The following table compares how the different Permanency Goals performed on some key child status and core system performance indicators. There were six different Permanency Goal types represented in the case sample. Sample sizes are quite small for most of the goals, so below standard scores are mostly due to just one or two cases receiving an unacceptable score. Only 25% of the cases (1 of 4) with the goal of Individualized Permanency had an acceptable score on permanency, and only 33% of cases (1 of 3) with the goal of Adoption had an acceptable score on permanency. Cases with the goal of Reunification scored particularly well; none of the indicators were below standard and Overall Child Status and Overall System Performance were both 100%.

Permanency Goal	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Adoption	3	100%	33%	100%	67%	67%	67%	33%	67%	33%	67%	67%
Guardianship (Non-Rel)	0	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%	0%
Guardianship (Rel)	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Individualized Perm.	4	100%	25%	75%	75%	50%	75%	50%	75%	75%	75%	75%
Remain Home	6	100%	100%	100%	100%	67%	83%	83%	100%	83%	100%	83%
Reunification	6	100%	83%	100%	100%	100%	100%	100%	83%	100%	83%	100%

## RESULTS BY CASEWORKER DEMOGRAPHICS

### Caseload

The following table compares how caseload may have affected some key Child Status and System Performance indicators. Caseloads in the sample were divided into two categories: caseloads of 16 cases or less and caseloads of 17 cases or more. Regardless of caseload, Overall Child Status scored above standard. Overall System Performance scored above standard for lower caseloads, but was slightly below standard for higher caseloads. The sample shows that 32% of workers (6 of 19) had high caseloads. The total sample size was 19 rather than 20 because one caseworker didn't provide caseload information.

Caseload Size	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
16 cases or less	13	100%	77%	92%	92%	77%	92%	85%	92%	85%	85%	92%
17 cases or more	6	100%	50%	100%	83%	83%	83%	67%	67%	83%	83%	83%

## Worker Experience

The following table compares how Length of Employment as a caseworker impacts performance. The workers were distributed fairly evenly over the years of experience. Half had more than four years experience and half had less.

Length of Employment in Current Position	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Less than 12 months	2	100%	50%	100%	100%	100%	100%	50%	100%	100%	100%	100%
12 to 24 months	5	100%	80%	100%	100%	80%	80%	80%	80%	80%	100%	80%
24 to 36 months	2	100%	50%	100%	50%	50%	50%	50%	50%	50%	50%	50%
36 to 48 months	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
48 to 60 months	4	100%	50%	75%	100%	75%	100%	75%	100%	100%	75%	100%
60 to 72 months	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	0%	100%
More than 72 months	5	100%	80%	100%	80%	60%	80%	80%	80%	60%	100%	80%

## RESULTS BY OFFICE

The following table compares how offices within the region performed on key Child Status and System Performance indicators. Cases from seven offices were selected as part of the sample. Four of the seven offices (Beaver, Cedar City, Kanab, and Panguitch) scored 100% on both Overall Child Status and Overall System Performance. Five of the seven offices had a sample size of only 1 or 2 cases; so one unacceptable score could result in a score of 0%. Of the three cases with unacceptable Overall System Performance, one was from the Richfield office and the other two were from the St. George office.

Office	# in Sample	Safety	Prospects for Permanence	Overall Child Status	Engagement	Teaming	Assessment	Long-Term View	Child and Family Plan	Intervention Adequacy	Tracking & Adapting	Overall System Performance
Beaver	1	100%	100%	100%	100%	100%	100%	100%	100%	0%	100%	100%
Cedar City	5	100%	80%	100%	100%	100%	100%	100%	80%	100%	100%	100%
Kanab	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Manti	1	100%	0%	0%	100%	0%	100%	100%	100%	100%	0%	100%
Panguitch	1	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%	100%
Richfield	2	100%	50%	100%	100%	50%	50%	0%	100%	50%	100%	50%
St. George	9	100%	67%	100%	78%	67%	78%	67%	78%	78%	78%	78%

## RESULTS BY AGE

OSR looked at the effect of age on Stability, Permanency, Overall Child Status, and Overall System Performance. The scores on Stability and Permanency were highest for the youngest children and lowest for children over age 16.

Age	# in Sample	Stability	Prospects for Permanence	Overall Child Status	Overall System Performance
5 years or less	2	100%	100%	100%	100%
6-10 years	9	89%	67%	100%	89%
11-15 years	5	80%	100%	100%	80%
16 + years	4	25%	25%	75%	75%

## SYSTEM INDICATORS

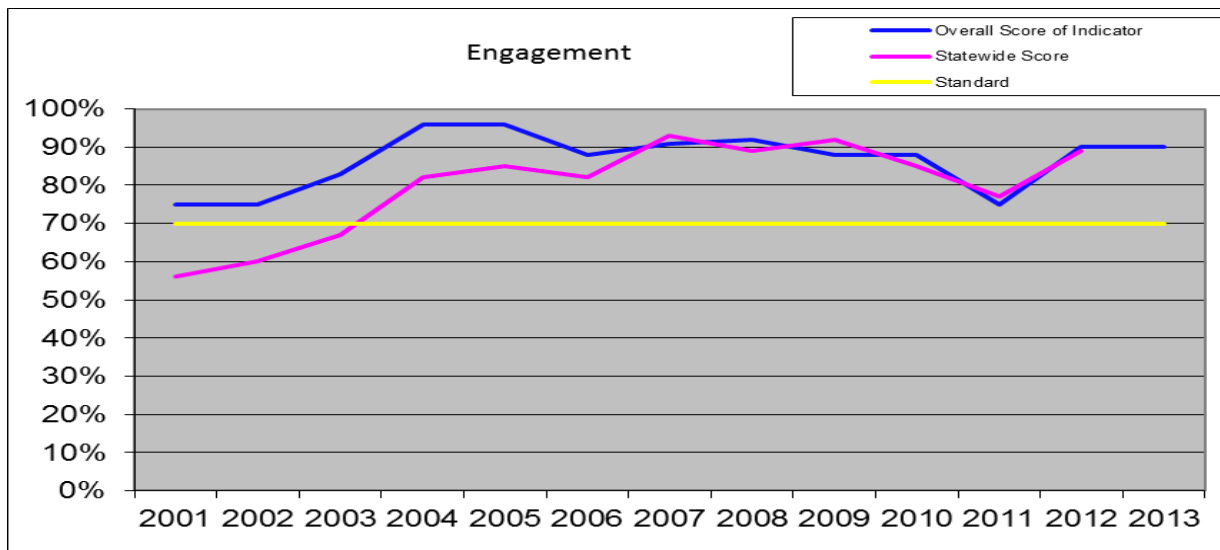
Below is data for all system indicators (Engagement, Teaming, Assessment, Long-term View, Child and Family Plan, Intervention Adequacy, and Tracking and Adaptation) over the last 13 years showing how the ratings of 1 (completely unacceptable), 2 (substantially unacceptable), 3 (partially unacceptable), 4 (minimally acceptable), 5 (substantially acceptable) and 6 (optimal) are trending within each indicator. The table for each indicator in the section below shows an average and percentage score for that indicator. The line graph represents the percentage of the indicator that scored within the acceptable range. The most ideal trend would be to see an increase in the average score of the indicator along with an increase in the percentage score. Statewide scores for FY2013 will not be available until the end of the fiscal year and therefore do not appear in the tables or charts.

Southwest region's score on Overall System Performance improved this year. Scores improved on four of the System Performance indicators (Teaming, Assessment, Long-term View, and Plan). The other three System Performance indicators remained the same. All scored above the 70% standard.

### Child and Family Engagement

Both the average and the percentage scores on Engagement remained the same this year as last year. The region's score on this indicator has mirrored the state score for the past several years.

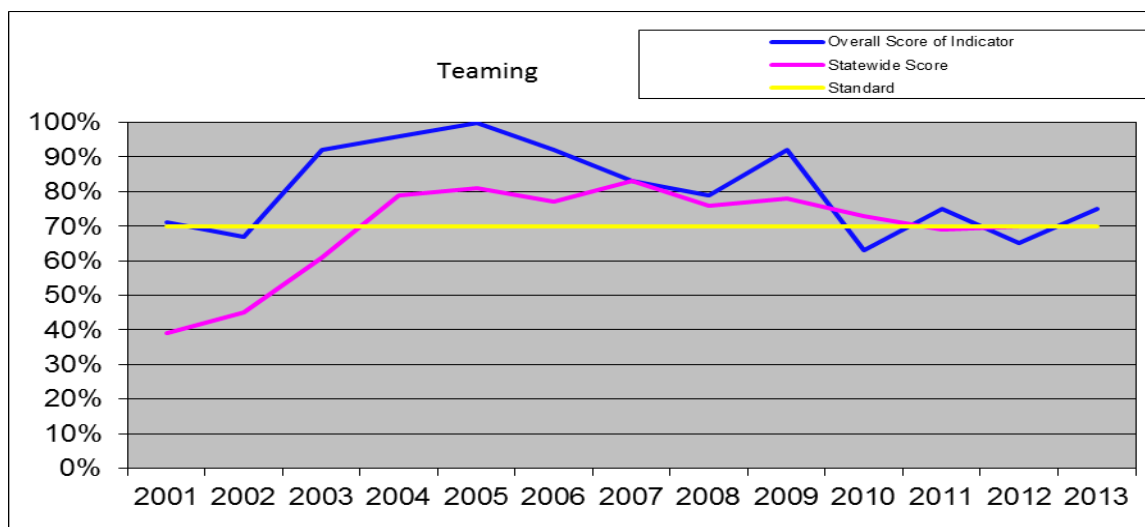
Engagement													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	4.29	3.96	4.54	4.88	5.00	4.63	4.43	4.54	4.54	4.33	4.04	4.40	4.40
Overall Score of Indicator	75%	75%	83%	96%	96%	88%	91%	92%	88%	88%	75%	90%	90%
Statewide Score	56%	60%	67%	82%	85%	82%	93%	89%	92%	85%	77%	89%	



## Teaming

The Teaming score rose from 65% to 75% while the average score remained the same. The region was below the state score last year but has raised the score back above the standard.

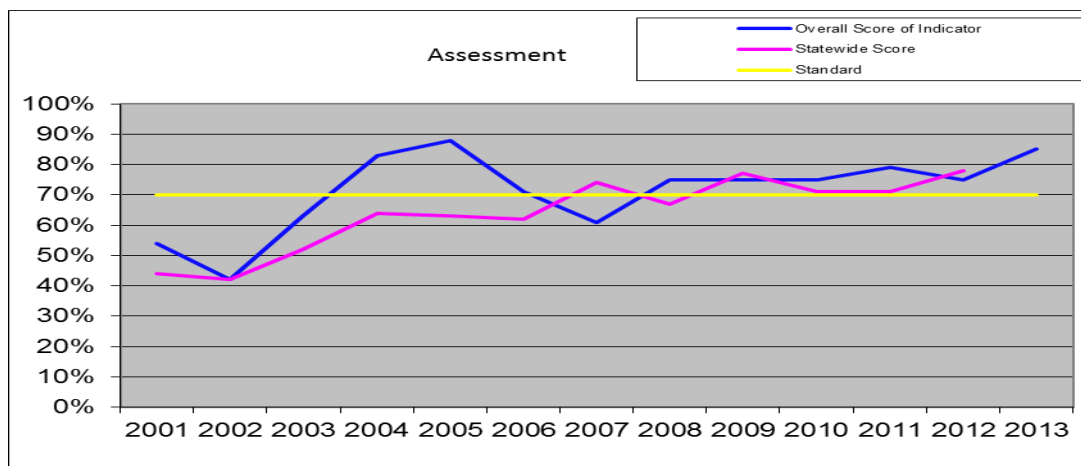
Teaming													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	4.00	3.88	4.63	4.63	5.00	4.63	4.17	4.17	4.42	4.00	4.08	4.05	4.05
Overall Score of Indicator	71%	67%	92%	96%	100%	92%	83%	79%	92%	63%	75%	65%	75%
Statewide Score	39%	45%	61%	79%	81%	77%	83%	76%	78%	73%	69%	70%	



## Assessment

Both the average and percentage scores both increased this year. It appears the region will exceed the state score.

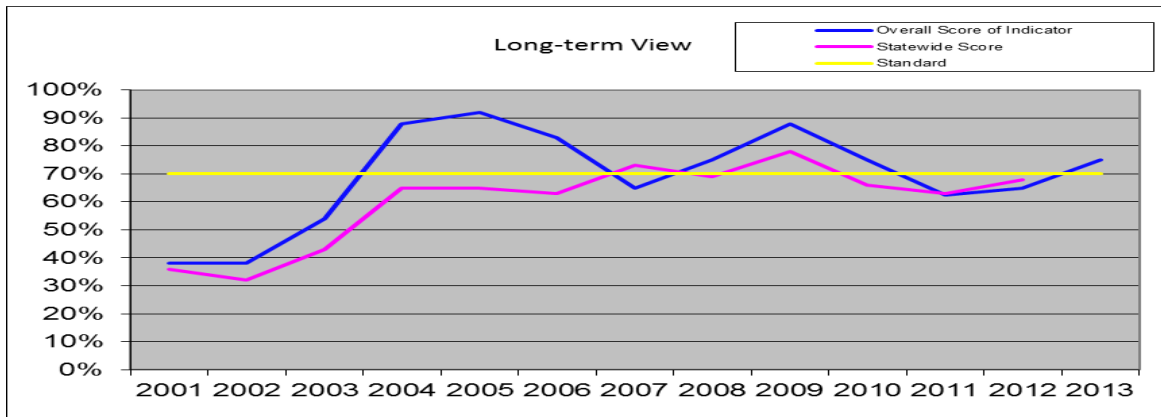
Assessment													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	3.83	3.42	3.96	4.25	4.54	4.29	3.83	4.13	4.04	3.96	4.04	4.00	4.10
Overall Score of Indicator	54%	42%	63%	83%	88%	71%	61%	75%	75%	75%	79%	75%	85%
Statewide Score	44%	42%	52%	64%	63%	62%	74%	67%	77%	71%	71%	78%	



## Long-Term View

Both the average and percentage scores rose this year. The percentage score is now above standard.

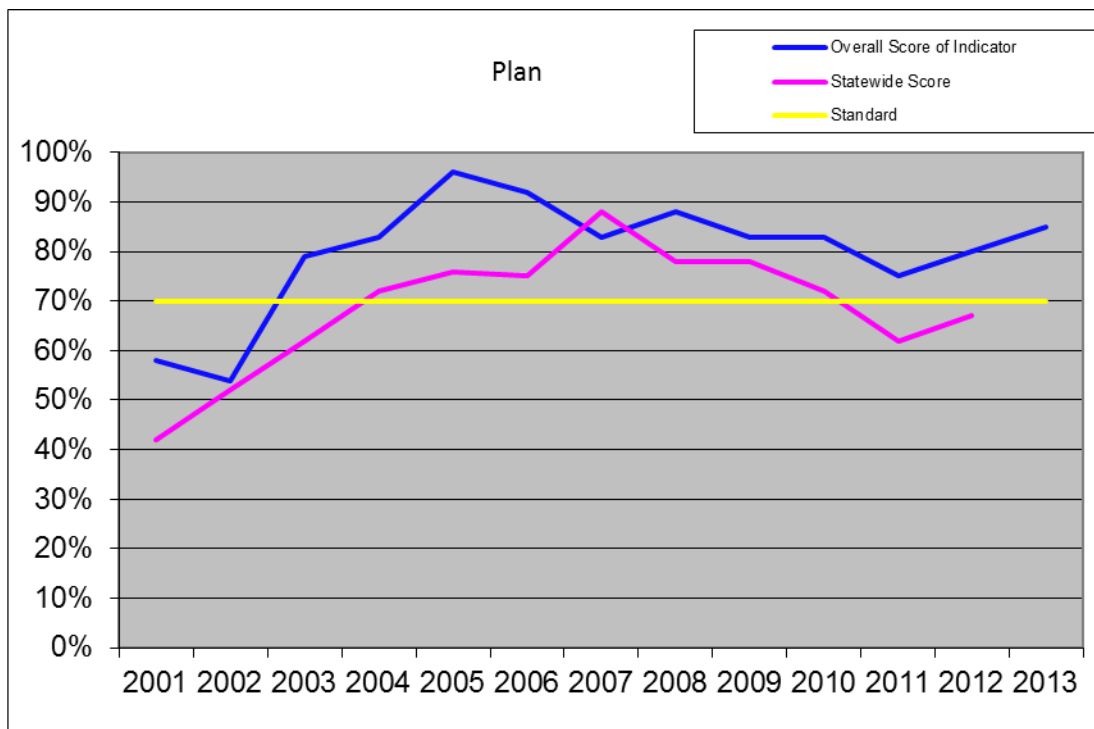
Long-Term View													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	3.42	3.13	3.83	4.42	4.54	4.38	3.83	4.08	4.29	4.13	3.92	3.95	4.15
Overall Score of Indicator	38%	38%	54%	88%	92%	83%	65%	75%	88%	75%	63%	65%	75%
Statewide Score	36%	32%	43%	65%	65%	63%	73%	69%	78%	66%	63%	68%	



## Plan

Both the average and percentage scores rose this year. The percentage score is well above standard and well above the state average.

Child and Family Plan													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	3.79	3.63	4.17	4.38	4.71	4.58	4.13	4.29	4.21	4.21	4.04	4.05	4.25
Overall Score of Indicator	58%	54%	79%	83%	96%	92%	83%	88%	83%	83%	75%	80%	85%
Statewide Score	42%	52%	62%	72%	76%	75%	88%	78%	78%	72%	62%	67%	

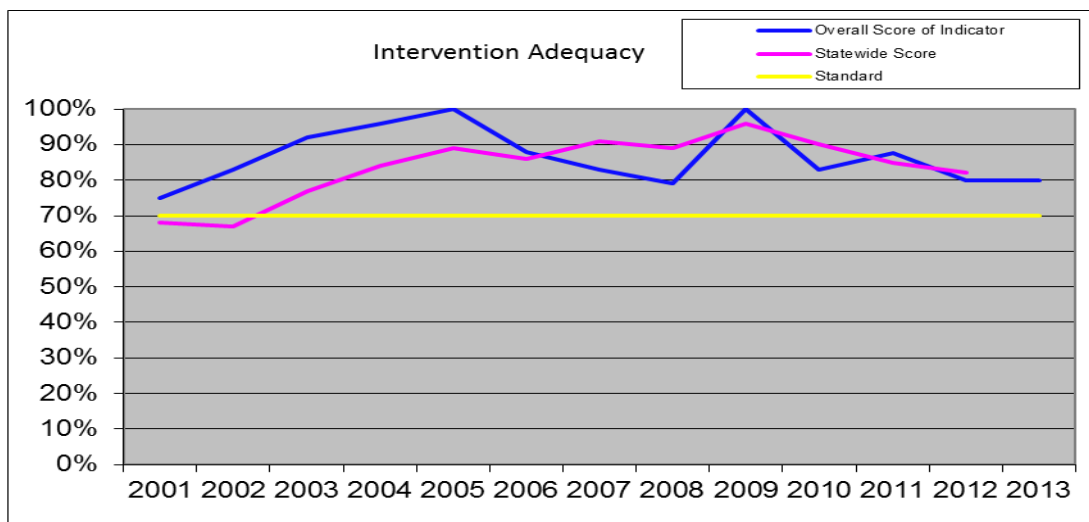




## Intervention Adequacy

The percentage score remained identical to last year; however, the average score rose, meaning practice actually improved.

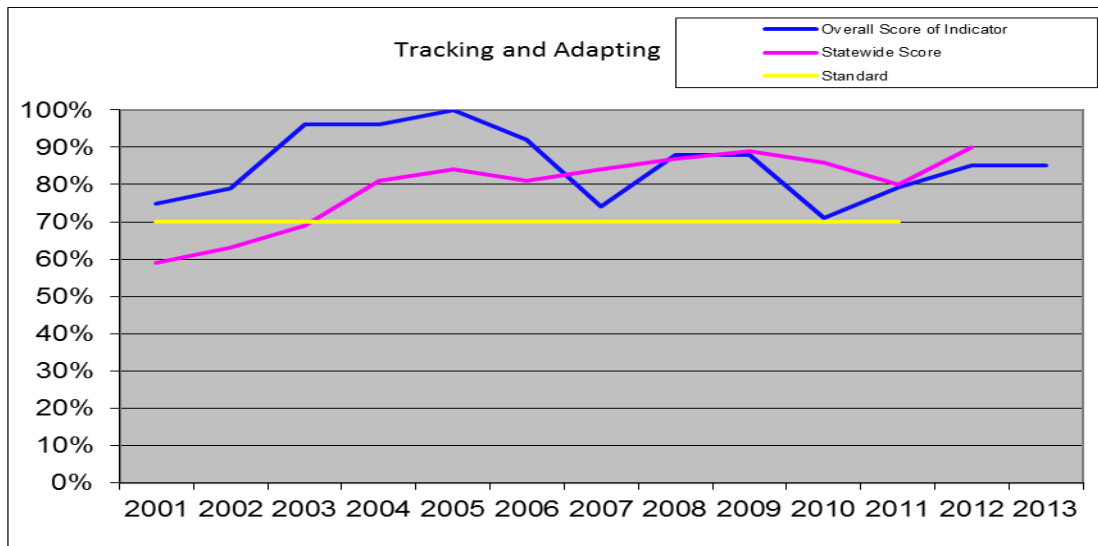
Intervention Adequacy													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	4.08	4.21	4.63	4.75	5.04	4.54	4.17	4.33	4.75	4.54	4.21	4.15	4.25
Overall Score of Indicator	75%	83%	92%	96%	100%	88%	83%	79%	100%	83%	88%	80%	80%
Statewide Score	68%	67%	77%	84%	89%	86%	91%	89%	96%	90%	85%	82%	



## Tracking and Adaptation

The percentage score remained the same as last year and the average was barely lower.

Tracking and Adaptation													
	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013
Average Score of Indicator	4.33	4.29	4.92	4.88	5.21	4.67	4.00	4.38	4.58	4.21	4.25	4.50	4.45
Overall Score of Indicator	75%	79%	96%	96%	100%	92%	74%	88%	88%	71%	79%	85%	85%
Statewide Score	59%	63%	69%	81%	84%	81%	84%	87%	89%	86%	80%	90%	



## **V. Summary and Improvement Opportunities**

### **Summary**

During the FY2013 Southwest Region Qualitative Case Review (QCR), numerous strengths were identified about child welfare practice. It is clear that there is significant commitment and hard work devoted to ensuring the safety and well-being of the children and families.

#### **Child Status**

Southwest Region scored well above standard on Overall Child Status with a score of 95%, meaning only one of 20 cases had an unacceptable overall score. Every case scored acceptable on Safety, and every Child Status indicator was above standard. Five of the indicators scored higher than last year and two remained the same. Only the Satisfaction score declined, but at 84% it was still well above standard.

#### **System Performance**

Southwest Region scored 85% on Overall System Performance which meet the 85% standard. Scores improved on four of the seven indicators (Teaming, Assessment, Long-term View and Plan) and remained the same on the other three indicators. Every indicator scored above standard. Remarkably, not only did every indicator score above standard, but every category within each indicator (Child, Father, Mother, etc.) also scored above standard.

### **Improvement Opportunities**

Southwest Region had an improvement plan last year for Teaming, Long-term View, Permanency, and Family Connections because all these indicators fell below standard last year. There was improvement in all of these indicators this year, and the scores on all four indicators were above standard. Because every indicator score and both overall scores were above standard, no improvement plan will be required this year; however, the region may choose to continue their focus on the same four indicators. Although all are above standard and much improvement was made this year, they are still the four lowest scoring indicators.